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SCHEDULE B (FEC Form 3) TEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 96 OF 108 (check only one)    X   17	
Any information copied from such Reports and Statements or for commercial purposes, other than using the name and		y person for the purpose of soliciting contributions	
NAME OF COMMITTEE (In Full)  Friends of Bill Posey			
Full Name (Last, First, Middle Initial)  A. Publix Supermarket		Date of Disbursement	
Mailing Address 3300 Publix Corporate Parkway		01 18 2014	
City State Lakeland FL	Zip Code 33811	Amount of Each Disbursement this Period	
Purpose of Disbursement food & beverage		97.11 Transaction ID : D3-00N10K	
Candidate Name	Categor Type	[MEMO ITEM]	
Office Sought:  House  Senate  President  Disbursement For American Senate  Other		Credit Card Item	
State: District:			
Full Name (Last, First, Middle Initial)  Visa  Mailing Address P. O. Box 30131		Date of Disbursement  M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y	
City State	Zip Code	Amount of Each Disbursement this Period	
Tampa FL	33630	Amount of Each Dispursement this Feriod	
Purpose of Disbursement see memo entries  Candidate Name  Category/		539.85 Transaction ID : D880-00HS3w	
Office Sought:  House Senate President  State:  Disbursement For American Senate Other			
Full Name (Last, First, Middle Initial)			
SafeCart.com		Date of Disbursement	
Mailing Address 1205-4464 Markham Street		02 05 7 Y Y Y Y Y Y Z Z Z Z Z Z Z Z Z Z Z Z Z	
City State Zip Code Victoria BC V8Z 7X8		Amount of Each Disbursement this Period	
Purpose of Disbursement tech support		150.00 Transaction ID : D2-01kJ03	
Candidate Name Categor Type			
		Credit Card Item	
State: District:			
SUBTOTAL of Disbursements This Page (optional)		539.85	

TOTAL This Period (last page this line number only).....